Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 1 of 76

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pá	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Kevin First name	First name
	Write the name that is on your government-issued picture identification (for example, your driver's	J. Middle name Thomas	Middle name
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last 8 years	First name	First name
	Include your married or	Middle name	Middle name
	maiden names.	Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX3837	xxx - xx-
	Security number or federal Individual	OR	OR
	Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 2 of 76

D	ebtor 1 Kevin	J. Thomas	Case number (if known)
	First Name	Middle Name Last Name	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		18227 Hart Dr. Apt. 1S Number Street	Number Street
		Homewood Illinois 60430	
		Homewood Illinois 60430 City State Zip Code	City State Zip Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City Chate 7's Code
_		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 3 of 76

De	btor 1 Kevin	J.	Thomas	Case number (if kno	wn)
	First Name	Middle Name	Last Name		
Pa	rt 2: Tell the Court Abo	out Your Bankruptcy Case			
	The chapter of the Bankruptcy Code you are choosing to file under	Check one. (For a brief descrip Bankruptcy (Form B2010)). Also Chapter 7 Chapter 11 Chapter 12 Chapter 13			<i>§ 342(b) for Individuals Filing for</i> priate box.
	How you will pay the fee	more details about how y cashier's check, or mone may pay with a credit car I need to pay the fee in a Individuals to Pay Your F I request that my fee be judge may, but is not required the official poverty line the	you may pay. Typically, if yey order If your attorney is rd or check with a pre-print installments. If you choos Filing Fee in Installments (Ce waived (You may request quired to, waive your fee, ar hat applies to your family syou must fill out the Applie	ou are paying the submitting your red address. e this option, sign official Form 103, this option only and may do so only size and you are u	he clerk's office in your local court for a fee yourself, you may pay with cash, payment on your behalf, your attorney in and attach the <i>Application for</i> A). If you are filing for Chapter 7. By law, a y if your income is less than 150% of nable to pay the fee in installments). If the Chapter 7 Filing Fee Waived (Official)
	Have you filed for bankruptcy within the last 8 years?	Yes. District District District	When When	MM / DD / YYYY	Case number Case number Case number
	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	Yes. Debtor District Debtor District	When	MM / DD / YYYY	Relationship to you Case number, if known Relationship to you Case number, if known
	Do you rent your residence?	✓ No. Go to line 12 Yes. Fill out <i>Initia</i> .	2.		you want to stay in your residence? t You (Form 101A) and file it with

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 4 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. **✓** proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance **Bankruptcy Code and** sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are you a small business debtor? No. I am not filing under Chapter 11. V For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have $\overline{}$ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 5 of 76

Debtor 1 Kevin J. Thomas Case number (if known)
First Name Middle Name Last Name

Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan. Attach a copy of the certificate and the payment plan. The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit ☐ I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you are not eligible to file. I certify that I asked for credit counseling services I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. My physical disability causes me to Disability. My physical disability causes me to Disability. be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Mair Document Page 6 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 6: **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as 16. What kind of debts do incurred by an individual primarily for a personal, family, or household purpose." you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded **V** No. and administrative expenses are paid that Yes. funds will be available for distribution to unsecured creditors? **7** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 50-99 5,001-10,000 50,001-100,000 do you estimate that 100-199 10,001-25,000 More than 100,000 you owe? 200-999 \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your liabilities to be? \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and For you correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X X /s/ Kevin Thomas Signature of Debtor 1 Signature of Debtor 2 Executed on _ 4/5/2017 Executed on MM / DD / YYYY MM / DD / YYYY

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 7 of 76

Debtor 1 Kevin	J.	Thomas	Case number (iii	fknown)			
First Name	Middle Name	Last Name	<u></u>				
For your attorney, if you are represented by one	eligibility to proceed und	der Chapter 7, 11, 12, or 1	3 of title 11, Unite	nave informed the debtor(s) about ed States Code, and have explained the also certify that I have delivered to the			
If you are not	debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I						
represented by an	have no knowledge after	r an inquiry that the inform	nation in the sched	dules filed with the petition is incorrect.			
attorney, you do not				·			
need to file this page.	/s/ Chris Prvor		Date	4/5/2017			
	Signature of Attorney f	or Debtor		MM / DD / YYYY			
	,						
	Chris Pryor						
	Printed name						
	Semrad Law Firm						
	Firm name						
	11101 S. Western Ave	enue					
	Street						
	Chicago	Illin	ois	60643			
	City	Sta	te	Zip Code			
	Contact phone		Email address	cpryor@semradlaw.com			
			Illinois	<u>s</u>			
	Bar number		State				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 8 of 76

Fill in this information to identify your case:							
Debtor 1	Kevin	J.	Thomas				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	Bankruptcy Court for the:	Northern	District of Illinois				
			(State)				
Case number (If known)							

٦	Check if this is an
	amended filing

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	Your assets Value of what you own
. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i>	\$35,690.00
1c. Copy line 63, Total of all property on <i>Schedule A/B</i>	\$35,690.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$7,915.00
s. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	\$108,203.50
	\$116,118.50
Your total liabilities	
Your total liabilities Part 3: Summarize Your Income and Expenses	
Part 3: Summarize Your Income and Expenses	\$0.005.00
	\$2,005.90

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 9 of 76

Debtor 1 Kevin **Thomas** _ Case number (if known) Middle Name First Name Last Name Part 4: **Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes. 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$2,757.33 Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: From Part 4 on Schedule E/F, copy the following: **Total claim** \$0.00 9a. Domestic support obligations (Copy line 6a.) \$0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) \$0.00 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) \$53,494.00 9d. Student loans. (Copy line 6f.) \$0.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) \$0.00 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

\$53,494.00

9g. Total. Add lines 9a through 9f.

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 10 of 76

Fill in this	information to identi	fy your case:			
Debtor 1	I/ ovin	1	Thomas		
Deptor I	Kevin First Name	J. Middle N	Thomas Last Name		
Debtor 2					
(Spouse, if fil	ing) First Name	Middle N	ame Last Name		
United Sta	ites Bankruptcy Cour	t for the: Northern	District of Illinois (State)		
Case num (If known)	ber				
Officia	l Form 106 <i>A</i>	N/B		•	Check if this is an amended filing
Sched	dule A/B: P	roperty			12/1
category v responsibl write your	where you think it fi e for supplying corr name and case nur	ts best. Be as complete a ect information. If more s nber (if known). Answer e	st an asset only once. If an asset fits in mondaccurate as possible. If two married pe pace is needed, attach a separate sheet to very question. nd, or Other Real Estate You Own or	ople are filing together, both a o this form. On the top of any a	re equally
	No. Go to Part 2	gal or equitable interest i	n any residence, building, land, or similar	property?	
<u> </u>					
Ц	Yes. Where is the pro	operty?			
			What is the property? Check all that apply.		claims or exemptions. Put red claims on <i>Schedule D:</i>
1.1	Street address, if ava	ilable, or other description	Single-family home		ims Secured by Property.
			Duplex or multi-unit building Condominium or cooperative	Current value of the	Current value of the
			Manufactured or mobile home	entire property?	portion you own?
			Land		
	Number Street		Investment property	Describe the nature o	
			Timeshare	interest (such as fee s the entireties, or a life	
	City S	tate Zip Code	Other		cotatoj, ii kilowii.
			Who has an interest in the property? Che	Check if this is co	mmunity property
			one.	Ш	
			Debtor 1 only		
			Debtor 2 only Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
				162. See a see de code cod	
			Other information you wish to add about property identification number:	this item, such as local	
If you	own or have more th	an one, list here:			
			What is the property? Check all that apply.		claims or exemptions. Put
1.2	Street address if ava	ilable, or other description	Single-family home		red claims on Schedule D: ims Secured by Property.
	Olicet address, ii ave	mable, of other accomplicit	Duplex or multi-unit building	Current value of the	
			Condominium or cooperative	entire property?	Current value of the portion you own?
			Manufactured or mobile home		
	Number Street		Land	Describe the nature o	f vour ownershin
			Investment property	interest (such as fee s	imple, tenancy by
	City S	tate Zip Code	Timeshare Other	the entireties, or a life	e estate), if known.
	-	·		Check if this is co	mmunity property
			Who has an interest in the property? Che one.		umzy proporcy
			Debtor 1 only		
			Debtor 2 only		
			Debtor 1 and Debtor 2 only		
			At least one of the debtors and another		
			Other information you wish to add about property identification number:	this item, such as local	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 11 of 76

Debtor 1	Kevin First Name	J. Middle Name	Thomas Last Name	Case number	(if known)	
	et address, if available, or oth		That is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property. Current value of the portion you own? f your ownership
City	State		Timeshare Other Tho has an interest in the property Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and an ther information you wish to add	other	Check if this is co (see instructions)	e estate), if known.
	the dollar value of the port ve attached for Part 1. Wri	pi ion you own for alte te that number he	roperty identification number: II of your entries from Part 1, incl ere.			
Do you ow you own t	hat someone else drives. If yours, trucks, tractors, sport utili	equitable interest ou lease a vehicle, a	in any vehicles, whether they are llso report it on Schedule G: Executo ycles	-	-	
Ye 3.1	Make Model: Year: Approximate mileage: Other information: 2006 Dodge Charger - Debi	Dodge Charger 2006 109000 tor to Reaffirm	Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar	nd another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$4550.00
3.2	Make Model: Year: Approximate mileage: Other information:		check if this is community instructions) Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors ar Check if this is community instructions)	perty? Check	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property. Current value of the portion you own?

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 12 of 76

	Kevin First Name	J. Middle Name	Thomas Last Name	Case number	er (if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communinstructions)	nly is and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Lims Secured by Property. Current value of the portion you own?
3.4	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors Check if this is communication.	nly is and another	the amount of any secu	claims or exemptions. Pured claims on Schedule Laims Secured by Property. Current value of the portion you own?
		, , , , , , , , , , , , , , , , ,	r recreational vehicles, other			
Exar ✓ 4.1	No Yes Make	s, personal watercraft,	Who has an interest in the jone.	·	Do not deduct secured	claims or exemptions. Pur red claims on <i>Schedule L</i>
✓	No Yes	s, personal watercraft,	Who has an interest in the	property? Check hly s and another	Do not deduct secured the amount of any secu	claims or exemptions. Pured claims on <i>Schedule Lims Secured by Property</i> . Current value of the portion you own?
4.1	No Yes Make Model: Year: Approximate mileage:	s, personal watercraft,	Who has an interest in the pone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 on At least one of the debtors	property? Check hly s and another hity property (see property? Check	Do not deduct secured the amount of any secu Creditors Who Have Clas Current value of the entire property? Do not deduct secured the amount of any secu	red claims on Schedule in ims Secured by Property. Current value of the

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 13 of 76

De	ebtor 1	Kevin	J.	Thomas	Case number (if known)	
		First Name	Middle Name	Last Name		_
Pa	rt 3:	Describe Y	our Personal and Household	d Items		
D	o you	own or hav	e any legal or equitable inter	rest in any of the following	g items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
		_	and furnishings			
	Exampi No	les: Major app	iances, furniture, linens, china, kitc	henware		
V		escribe	Miscellaneous goods and furniture			\$300.00
		ronics les: Television:	s and radios; audio, video, stereo, a	and digital equipment; compute	ers, printers, scanners; music	1
	No					
✓	Yes. D	escribe	Miscellaneous electronics			\$250.00
	Exampl No	stamp, co	ue nd figurines; paintings, prints, or o in, or baseball card collections; oth			
	Yes. D	escribe				
		les: Sports, ph	rts and hobbies otographic, exercise, and other hol s; carpentry tools; musical instrume		ables, golf clubs, skis; canoes	
	Yes. D	escribe				
	0. Fire Exampl		es, shotguns, ammunition, and rela	ated equipment		
✓	No					
	Yes. D	escribe				
	1. Clot Examp		clothes, furs, leather coats, designe	r wear, shoes, accessories		1
	No	No. 20 11 12				7
⊻	Yes. L	escribe	Miscellaneous clothing			\$450.00
		-	ewelry, costume jewelry, engageme r	ent rings, wedding rings, heirloc	om jewelry, watches, gems,	-
넫	No Voc F) oo orib o				7
Ш	res. L	escribe				
		-farm animal les: Dogs, cats	s s, birds, horses			-
✓	No					
	Yes. D	escribe				
1	4. Any	other person	al and household items you did	not already list, including an	y health aids you did not list	7
✓	No					_
	Yes. D	escribe				
			lue of all of your entries from Pa			\$1000.00

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 14 of 76

Debtor 1 Kevin **Thomas** Case number (if known) Middle Name First Name Last Name Part 4: **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. **Cash** Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition **✓** No Yes Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. Institution name: Fifth Third Bank \$95.00 17.1. Checking account: 17.2. Checking account: 17.3. Savings account: Fifth Third Bank \$45.00 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts No Institution or issuer name: Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture **✓** No % of ownership: Name of entity Yes. Give specific information about

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 15 of 76

Deb ¹	tor 1 Kevin	J.	Thomas	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments	orate bonds and other negotia include personal checks, cashiers ents are those you cannot transfer a lasuer name:	checks, promissory not	tes, and money orders.	
21	Patiroment or pension				
21.	Retirement or pension Examples: Interests in II), thrift savings accounts	, or other pension or profit-sharing plans	
	✓ No	Type of account:	Institution name:		
	Yes. List each account	401(k) or similar plan:	monation name.		
	separately.	Pension plan:			
		IRA:			
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		d deposits you have made so tha with landlords, prepaid rent, publ			
	100	Electric:			
		Gas:			
		Heating oil:			
		Security deposit on rental unit: Prepaid rent:	-		
		Telephone:	-		
		Water:			
		Rented furniture:			
		Other:			
23	Annuities (A contract for	or a periodic payment of money to	o you either for life or for	a number of years)	
_0.	No Yes	Issuer name and description:	. , , , , , , , , , , , , , , , , , , ,	anamos or Joseph	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 16 of 76

Debt	tor 1 Kevin	J.	Thomas	Case number (if known)	
	First Name	Middle Name	Last Name		
24.	Interests in an education I 26 U.S.C. §§ 530(b)(1), 529		alified ABLE program, or und	er a qualified state tuition program.	
	No Institution nated Yes	ne and description. Separate	ely file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future	interests in property (oth	er than anything listed in line	e 1), and rights or powers	
	exercisable for your benefi	t			
	Yes. Describe				
26.			other intellectual property om royalties and licensing agre	ements	
	✓ No Yes. Describe				
27.			ve association holdings, liquor	licenses, professional licenses	
	Yes. Describe				
Mor	ney or property owed to	you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
		you?			portion you own?
	Tax refunds owed to you	you?			portion you own? Do not deduct secured
	Tax refunds owed to you No Yes. Give specific information	ation Anticipated T	ax Refund	Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you	ation Anticipated Taing whether e returns	ax Refund	Federal: State:	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support	ation Anticipated Taing whether ereturns		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so	ation Anticipated Taing whether ereturns		State:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support	ation ing whether e returns		State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so	ation ing whether e returns		State: Local: , divorce settlement, property settlemen	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so	ation ing whether e returns		State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so	ation ing whether e returns		State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so No Yes. Give specific informations	ation ing whether e returns sum alimony, spousal suppo		State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 t \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so No Yes. Give specific informations Other amounts someone on Examples: Unpaid wages, dis	ation Anticipated Trips whether e returns	ort, child support, maintenance,	State: Local: , divorce settlement, property settlemen Alimony: Maintenance: Support: Divorce settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump so No Yes. Give specific informations Other amounts someone on Examples: Unpaid wages, dis	ation ing whether e returns	ort, child support, maintenance,	State: Local: Alimony: Maintenance: Support: Divorce settlement: Property settlement:	\$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 17 of 76

Deb	tor 1 Kevin	J.	Thomas	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance po Examples: Health, disability		vings account (HSA); credit, h	nomeowner's, or renter's insurance	
	No Nome the incurren	Com	pany name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insuran of each policy and list		Insurance Policy		\$30000.00
32.	Any interest in property of If you are the beneficiary of property because someone	f a living trust, expect procee		ey, or are currently entitled to receive	
	✓ No				
	Yes. Describe				
33.		ies, whether or not you he oyment disputes, insurance	ave filed a lawsuit or made claims, or rights to sue	a demand for payment	
	Ves. Describe				
34.	Other contingent and un to set off claims	 liquidated claims of every	nature, including counter	claims of the debtor and rights	
	✓ No				
	Yes. Describe				
35.	Any financial assets you	did not already list			
	No No Poperibe				
	Yes. Describe				
36.			t 4, including any entries fo	or pages you have attached	\$30140.00
Part	5 Describe Any Busi	ness-Related Property	y You Own or Have an I	nterest In. List any real estate in Par	t 1 .
	_		in any business-related pr	•	
	No. Go to Part 6.				Current value of the portion you own?
	Yes. Go to line 38.			Ī	On not deduct secured claims or exemptions
38.	Accounts receivable or o	commissions you already e	earned		Storiptions
	✓ No				
	Yes. Describe				
39.	Office equipment, furnish	nings, and supplies			
			lems, printers, copiers, fax ma	achines, rugs, telephones, desks, chairs, elec-	ronic devices
	✓ No Ves Describe				
	Yes. Describe				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 18 of 76

Deb	tor 1 Kevin	J.	Thomas	Case number (if known)	
1.0	First Name	Middle Name	Last Name		
40.	Machinery, fixtures, e	equipment, supplies you	use in business, and tools of yo	our trade	
	✓ No				
	Yes. Describe				
	_				
44					
41.	Inventory				
	✓ No				
	Yes. Describe				
	_				
12	Interests in partnersh	nine or ioint vontures			
42.		iips or joint ventures			
	✓ No		Name of entity:	% of ownership:	
	Yes. Give specific		rianio or onacy.	% of awnording.	
	information about them		-		_
	urom				
					-
12	Customor lists mailing	g lists, or other compilat	ione		
43.		j lists, or other compliat	ions		
	✓ No				
	Yes. Do your lists i	include personally identifial	ole information (as defined in 11 l	J.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	erihe			
44.	Any business-related	property you did not alr	eady list		
	✓ No				
	Yes. Give specific				
	information				
					_
					
					_
			art 5, including any entries for		
•	are or write that hamb				
Part				y You Own or Have an Interest In.	
	If you own or have ar	n interest in farmland, list it i	n Part 1.		
46.	Do you own or have a	any legal or equitable int	erest in any farm- or commerc	ial fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47	_			portion you own? Do not deduct secured claims
		-			or exemptions
47.	Farm animals				
	Examples: Livestock, p	oultry, farm-raised fish			
	√ No				
	Yes. Describe				
	ш				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 19 of 76

Debt	tor 1 Kevin First Name	J. Middle Name	Thomas Last Name	Case number (if known)	
48.	Crops-either growing	or harvested			
	No Yes. Describe				
49.		ipment, implements, machinery, fixt	ures, and tools of trade		
	Yes. Describe				
50.	Farm and fishing sup	olies, chemicals, and feed			
	✓ No Yes. Describe				
51.	Any farm- and comm	ercial fishing-related property you di	d not already list		
	Yes. Describe				
		all of your entries from Part 6, includer here	ing any entries for pages y	you have attached	
Part 1	7: Describe All Pr	operty You Own or Have an Inte	rest in That You Did No	ot List Above	
	Do you have other pro	pperty of any kind you did not alread			
	✓ No	ts, country club membership			
	Yes. Give specific information				
54. A	dd the dollar value of a	all of your entries from Part 7. Write	that number here		•
Part 8	8: List the Totals	of Each Part of this Form			
55. F	Part 1: Total real estat	e, line 2		>	
56. r	part 2 total vehicles, li	ne 5	\$4550.00		
57. P	Part 3: Total personal a	nd household items, line 15	\$1000.00		
58. P	art 4: Total financial a	ssets, line 36	\$30140.00		
59. F	Part 5: Total business-	related property, line 45			
60. F	Part 6: Total farm- and	fishing-related property, line 52			
61. F	Part 7: Total other pro	perty not listed, line 54			
62.1	Total personal propert	y. Add lines 56 through 61	<u>\$35690.00</u>	Copy personal property total	+ \$35690.00
63. T	otal of all property on	Schedule A/B. Add line 55 + line 62			\$35690.00

		Case 17-10765	Doc 1	Filed 04/05/17 Document	Entered 04/ Page 20 of 7	05/17 12:13:31 6	Desc Main
Fill in	n this inforr	nation to identify your case	e:				
Deb	tor 1	Kevin	J.	Thomas			
Dalas	t O	First Name	Middle Na	me Last Nam	е		
	tor 2 use, if filing)	First Name	Middle Na	me Last Nam	e		
Unit	ed States B	ankruptcy Court for the: N	orthern	District of Illino	is		
Case	e number	_		(Stat	e)		
(If kno							_
Of	ficial I	Form 106C					Check if this is an amended filing
		C: The Prope	rty You C	laim as Exem	ıpt		12/15
infor as exaddir For extate the atax-exunder your	mation. L kempt. If r tional page each iten e a specif amount o exempt r er a law t	nore space is needed, fill les, write your name and n of property you claim ic dollar amount as ex f any applicable statute etirement funds—may	sted on Scheell out and attacted on and attacted case number as exempt, yempt. Alternatory limit. Som be unlimited in to a particuthe applicable	dule A/B: Property (Or ch to this page as ma (if known). ou must specify the tively, you may clain the exemptions—such in dollar amount. Ho alar dollar amount ar the statutory amount.	ificial Form 106A/ ny copies of <i>Part</i> . amount of the ex n the full fair mar n as those for hea wever, if you clai	B) as your source, lis 2: Additional Page as emption you claim. (ket value of the prop alth aids, rights to red m an exemption of 1	for supplying correct t the property that you claim necessary. On the top of any One way of doing so is to perty being exempted up to ceive certain benefits, and 100% of fair market value ined to exceed that amount,
1.	Which set	of exemptions are you cla	aiming? Check o	one only, even if your spo	ouse is filing with you	·	
	✓ You a	re claiming state and fede	eral nonbankrup	otcy exemptions. 11 U.S	S.C. § 522(b)(3)		
	You a	re claiming federal exemp	otions. 11 U.S.C	5. § 522(b)(2)			
2.	For any p	operty you list on Schedu	le A/B that you	claim as exempt, fill in	the information be	low.	

1. Which set of exemptions are you claiming? Check one on You are claiming state and federal nonbankruptcy example. You are claiming federal exemptions. 11 U.S.C. § 52 2. For any property you list on Schedule A/B that you claim. Brief description of the property and line on Schedule A/B that lists this property Current value of the property and line on Schedule A/B that lists this property Copy the value of Schedule A/B Brief description: Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from Schedule A/B: 03	exemptions. 11 U.S.C. § 522(b)(3) 22(b)(2) In as exempt, fill in the information below. Of Amount of the exemption you claim U.S.C. § 522(b)(3)	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)
You are claiming federal exemptions. 11 U.S.C. § 52 For any property you list on Schedule A/B that you claim Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value of Schedule A/B Brief description: Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from	22(b)(2) In as exempt, fill in the information below. Of Amount of the exemption you claim Check only one box for each exemption. from \$0 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS
Brief description: Brief description Brief description Current value of the property and line on Schedule A/B that lists this property Copy the value of Schedule A/B Brief description: Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from	of Amount of the exemption you claim Check only one box for each exemption. from \$0 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS
Brief description of the property and line on Schedule A/B that lists this property Current value of the portion you own Copy the value of Schedule A/B Brief description: Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from	of u Check only one box for each exemption. from \$0 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS
Brief description: Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from	Check only one box for each exemption. from \$0 100% of fair market value, up to any	735 ILCS 5/12-1001(c); 735 ILCS
description: \$4,550.00 Dodge Charger, 2006, 2006 Dodge Charger - Debtor to Reaffirm Line from	100% of fair market value, up to any	* **
Line from	applicable statutory limit	
Brief description: \$95.00 Checking account, Fifth	— \$95.00	735 ILCS 5/12-1001(b)
Third Bank Line from Schedule A/B: 17	100% of fair market value, up to any applicable statutory limit	_

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 21 of 76

Debtor 1 Kevin **Thomas** Case number (if known) Middle Name First Name Last Name Part 2: **Additional Page** Brief description of the property and **Current value of** Amount of the exemption you claim Specific laws that allow exemption line on Schedule A/B that lists this the portion you property Check only one box for each exemption. own Copy the value from Schedule A/B Brief 735 ILCS 5/12-1001(b) \$45.00 description: V \$45.00 Savings account, Fifth 100% of fair market value, up to any **Third Bank** applicable statutory limit Line from Schedule A/B: 17 735 ILCS 5/12-1001(b) Brief \$300.00 description: **V** \$300.00 Miscellaneous goods 100% of fair market value, up to any and furniture applicable statutory limit Line from Schedule A/B: 06 735 ILCS 5/12-1001(a) Brief description: \$450.00 **✓** \$450.00 Miscellaneous clothing 100% of fair market value, up to any Line from applicable statutory limit Schedule A/B: 11 735 ILCS 5/12-1001(b) Brief \$250.00 description: \$250.00 Miscellaneous 100% of fair market value, up to any electronics applicable statutory limit Line from Schedule A/B: 07 Brief 735 ILCS 5/12-1001(b) \$0.00 description: \$0 Federal, Anticipated Tax 100% of fair market value, up to any Refund applicable statutory limit Line from Schedule A/B: 28 Brief 735 ILCS 5/12-1001(f) \$30,000.00 description: \$30,000.00 Life Insurance Policy

100% of fair market value, up to any

applicable statutory limit

Line from

Schedule A/B:

31

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main

		Do	cument Page 22 of	76		
Fill in this info	rmation to identify your ca	se:				
Debtor 1	Kevin First Name	J. Middle Name	Thomas Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)			
Case number (If known)						
<u> </u>	Form 106D					Check if this is an amended filing
Schedu	ule D: Credito	ors Who Hav	ve Claims Secure	ed by Prop	ertv	12/15
more space is name and cas	-	nal Page, fill it out, num	e are filing together, both are equal ber the entries, and attach it to t	•		
-		,,	.y : vith your other schedules. You hav	e nothing else to ren	ort on this form	
	Fill in all of the information		vitir your ource someduies. Tou hav	c not in g cise to rep	ort ort tills form.	
		i Delow.				
	All Secured Claims					
separat	-	an one creditor has a part	ured claim, list the creditor icular claim, list the other creditors order according to the creditor's	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
	Finance	Describe the property	that secures the claim:	\$7,915.00	\$4,550.00	\$3,365.00
Creditor'	s Name CENTRAL ST	042 Automobile				
Numi		As of the date you file,	the claim is: Check all that apply.			
		Contingent				
EVANS		Unliquidated				
City Who ov	State ZIP Code wes the debt? Check one.	Disputed				
✓ De	btor 1 only	Nature of lien. Check a	ll that apply.			
	btor 2 only btor 1 and Debtor 2 only	An agreement you r car loan)	made (such as mortgage or secured			
	least one of the debtors	Statutory lien (such	as tax lien, mechanic's lien)			
and and	d another	Judgment lien from	a lawsuit			
□ to	eck if this claim relates a community debt	Other (including a ri				
Date de	ebt was	Last 4 digits of accour	nt number <u>2901</u>			

Add the dollar value of your entries in Column A on this page. Write that number

incurred

here:

\$7,915.00

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 23 of 76

	. 11.1.1.6.							
FIII II	n this intor	mation to identify your c	ase:					
Deb	tor 1	Kevin	J.	Thomas				
		First Name	Middle Name	Last Name				
Deb								
(Spo	use, if filing)	First Name	Middle Name	Last Name				
Unit	ed States E	ankruptcy Court for the:	Northern	District of Illinois				
		, ,		(State)				
Case (If knd	e number							
		400E/E				☐ Ch	eck if this is a	n amended filing
OII	iciai F	orm 106E/F				П		. ae.
Sc	hadı	ILA F/F: Cra	ditors Who	Have Une	cured Claims			12/15
	ricat		ditors will	Have Onse	cui cu Olalilis			12/15
other Form clain	r party to a 106A/B) a ns that are entries in t n).	any executory contracts and on <i>Schedule G: Exe</i> listed in <i>Schedule D: C</i>	s or unexpired leases that cutory Contracts and Uni- creditors Who Hold Claims tach the Continuation Pa	t could result in a clair expired Leases (Officia s Secured by Property.	ms and Part 2 for creditors wit n. Also list executory contracts I Form 106G). Do not include a If more space is needed, copy top of any additional pages, v	on Sched ny credito the Part y	dule A/B: Propers with partice on need, fill	perty (Official ally secured it out, number
1.	Do any ci	editors have priority un	secured claims against y	ou?				
		Go to Part 2.	,					
	Yes.							
2.	listed, ider As much a Continuat	ntify what type of claim it it as possible, list the claims ion Page of Part 1. If mon	is. If a claim has both priori	ty and nonpriority amoust ding to the creditor's nar particular claim, list the c		both priorit	ty and nonprio	ority amounts.
	,	, , , , , , , , , , , , , ,	,		,	Total	Priority	Nonpriority

claim

amount

amount

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 24 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. Total claim 4.1 American Credit Acceptance \$11,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 961 E MAIN ST 2ND FLOOR Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SPARTANBURG South Carolina 29302 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: **✓** Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Repossessed Other. Specify Is the claim subject to offset? Yes AT&T Mobility 4.2 \$518.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 6416 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60197 Carol Stream City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Collecting For -Is the claim subject to offset? **✓** No Yes 4.3 AT&T Mobility \$905.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 6416 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60197 Carol Stream Illinois City Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only **✓** Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Offician Yes Schedule E/F: Creditors Who Have Unsecured Claims page 2

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 25 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 Chase Bank \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? P.O. Box 659732 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 78265 City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ____ Notice Only Is the claim subject to offset? **✓** No Yes Check N Go \$500.00 4.5 Last 4 digits of account number _ Nonpriority Creditor's Name 3435 Dempster St When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Skokie Illinois 60076 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Collecting For -Is the claim subject to offset? **✓** No Yes 4.6 Commonwealth Edison \$310.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 3 Lincoln Ctr FI 4 n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60181 Oakbrook Ter Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims

✓ No Yes

At least one of the debtors and another

Is the claim subject to offset?

Check if this claim relates to a community debt

debts

Other. Specify ____

Debts to pension or profit-sharing plans, and other similar

Collecting For -

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 26 of 76

Debtor 1 Kevin J. Thomas Case number (if known)
First Name Middle Name Last Name

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth.

Total claim

Fail 2	Your NONPRIORITY Unsecured Claims - Continuation	i rage	
	After listing any entries on this page, number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
4.7	CONVERGENT OUTSOURCING	- Last 4 digits of account number 5058	\$206.00
	Nonpriority Creditor's Name Po Box 9004	When was the debt incurred? 6/2016	
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply.	
	Renton Washington 98057	Contingent	
	City State Zip Code	- Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or	
	At least one of the debtors and another	divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	001 Collection; Collecting for	
	✓ No	ORIGINAL CREDITOR: Other. Specify COMCAST	
	Yes	· · · · · · · · · · · · · · · · · · ·	
4.8	Cook County Department of Revenue		\$139.00
	Nonpriority Creditor's Name	- Last 4 digits of account number	
	118 N Clark St, Room 1160 Number Street	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		- Contingent	
	Chicago Illinois 60602	Unliquidated	
	City State Zip Code	Disputed	
	Who incurred the debt? Check one. Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Collecting For - Citation No.	
	Is the claim subject to offset?	Other. Specify RT00595471	
	✓ No		
	Yes		
4.9	Cook County Department of Revenue		\$284.00
4.9	Nonpriority Creditor's Name	- Last 4 digits of account number	Φ204.00
	118 N Clark St, Room 1160	When was the debt incurred?n/a	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		- Contingent	
	Chicago Illinois 60602	Unliquidated	
	Chicago Illinois 60602 City State Zip Code	- Disputed	
	Who incurred the debt? Check one.	Type of NONPRIORITY unsecured claim:	
	Debtor 1 only	Student loans	
	Debtor 2 only	불	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another	Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a community debt	Collecting For - Citation No.	
	Is the claim subject to offset?	Other. Specify RT00315023	
	✓ No		
	Yes		

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 27 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 ENHANCED RECOVERY CO L \$1,342.00 Last 4 digits of account number Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? 3/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: TMOBILE **✓** No Yes 4.11 ENHANCED RECOVERY CO L \$1,017.00 Last 4 digits of account number 7466 Nonpriority Creditor's Name 8014 BAYBERRY RD When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** Florida 32256 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? Other. Specify ORIGINAL CREDITOR: SPRINT **✓** No Yes **FALLS COLLECTION SVC** 4.12 \$274.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO BOX 668 When was the debt incurred? 4/2014 Street Number As of the date you file, the claim is: Check all that apply. Contingent GERMANTOWN 53022 Wisconsin Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? ORIGINAL CREDITOR: MEDICAL No PAYMENT DATA Other. Specify ___

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 28 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** FALLS COLLECTION SVC 4.13 \$41.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2016 PO BOX 668 Street Number As of the date you file, the claim is: Check all that apply. Contingent GERMANTOWN Wisconsin 53022 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: MEDICAL **✓** No Other. Specify PAYMENT DATA Yes 4.14 FED LOAN SERV \$53,494.00 Last 4 digits of account number 0001 Nonpriority Creditor's Name 400 Maryland Ave SW When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent District of Columbia 20202 Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify _ Is the claim subject to offset? **✓** No Yes Financial Control Solutions 4.15 \$41.00 Last 4 digits of account number Nonpriority Creditor's Name Po Box 668 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Wisconsin 53022 Germantown City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Collecting For - ACL, Inc. Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 29 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 First National Collection Bureau, Inc \$785.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 610 Waltham Way Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 89434 Sparks Nevada City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For - Verizon Wireless Is the claim subject to offset? **✓** No Yes First National Collection Bureau, Inc 4.17 \$234.00 Last 4 digits of account number _ Nonpriority Creditor's Name 610 Waltham Way When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Sparks Nevada 89434 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Collecting For - Bank of America Is the claim subject to offset? **✓** No Yes FIRST PREMIER BANK 4.18 \$438.00 Last 4 digits of account number Nonpriority Creditor's Name Jefferson Capital Systems, LLC PO Box 7999 When was the debt incurred? 8/2016 Number Street As of the date you file, the claim is: Check all that apply. c/o Kelly Lukason Contingent Saint Cloud 56302 Minnesota Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 30 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 Focus Receivables Management, LLC \$324.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1130 North Chase Pkwy Number As of the date you file, the claim is: Check all that apply. Suite #150 Contingent Unliquidated 30067 Marietta Georgia City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify ____ Collecting For - Directv Is the claim subject to offset? **✓** No Yes Franciscan Health & Fitness 4.20 \$500.00 Last 4 digits of account number _ Nonpriority Creditor's Name 100 197th Place When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Heights Illinois 60411 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Collecting For -Is the claim subject to offset? **✓** No Yes **FST PREMIER** 4.21 \$438.00 Last 4 digits of account number 4555 Nonpriority Creditor's Name When was the debt incurred? 8/2016 900 W DELAWARE Number Street As of the date you file, the claim is: Check all that apply. Contingent SIOUX FALLS 57104 South Dakota Unliquidated Zip Code State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify _ CreditCard Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 31 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.22 ICS Collection Service \$360.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 1010 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60477 Tinley Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Advocate Illinois Masonic Physicians Group Is the claim subject to offset? **✓** No Yes 4.23 IRS 1 \$12,000.00 Last 4 digits of account number _ Nonpriority Creditor's Name n/a PO Box 7346 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Philadelphia Pennsylvania 19101 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify _ Taxes Is the claim subject to offset? **✓** No Yes JEFFERSON CAPITAL SYST 4.24 \$784.00 Last 4 digits of account number 9003 Nonpriority Creditor's Name When was the debt incurred? 4/2015 16 MCLELAND RD Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT CLOUD 56303 Minnesota Unliquidated Zip Code City State Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 32 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.25 Midwest Diagnostic Pathology, SC \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 578 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60068 Park Ridge Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify ___ Collecting For -Is the claim subject to offset? **✓** No Yes 4.26 Nicor Gas \$509.00 Last 4 digits of account number _ Nonpriority Creditor's Name PO Box 0632 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Aurora Illinois 60507 State Zip Code Disputed City Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ___ Collecting For -Is the claim subject to offset? **✓** No Yes PENN CREDIT CORPORATION 4.27 \$112.50 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 916 S 14TH ST n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated HARRISBURG 17104 Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Cook County Other. Specify Department of Revenue Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 33 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.28 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1 S Wacker Dr Fl 36 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60606 Chicago Illinois City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt ✓ Other. Specify _ Notice Only Is the claim subject to offset? **✓** No Yes 4.29 Prestige Financial Services \$14,000.00 Last 4 digits of account number _ Nonpriority Creditor's Name 1420 S. 500 W When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated SALT LAKE CITY Utah 84115 City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collecting For - Case No. 11-M1-Other. Specify Is the claim subject to offset? **✓** No Yes Public Storage 4.30 \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2701 Lake Worth rd n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Lake Worth 33460 Florida City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify ____ Collecting For -Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 34 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.31 \$350.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2017 20816 44TH AVE WES Number As of the date you file, the claim is: Check all that apply. Contingent 98036 LYNNWOOD Washington Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** ORIGINAL CREDITOR: 11 Other. Specify DIRECTV Yes 4.32 Speedy Cash \$1,000.00 Last 4 digits of account number Nonpriority Creditor's Name 1931 N. Mannheim Rd When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60160 Melrose Park Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Collecting For -Is the claim subject to offset? **✓** No Yes State of Illinois - Dept of Revenue 4.33 \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 19043 When was the debt incurred? n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Springfield 62794 Illinois Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify __ Taxes Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 35 of 76

Debtor 1 Kevin Thomas Case number (if known) Middle Name First Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.34 Stellar Rec \$180.00 Last 4 digits of account number Nonpriority Creditor's Name 1327 HIGHWAY 2 WES SUITE 100 When was the debt incurred? 1/2017 Number As of the date you file, the claim is: Check all that apply. Contingent KALISPELL Montana 59901 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Collection; Collecting for Is the claim subject to offset? **| ORIGINAL CREDITOR: 11 ✓** No Other. Specify COMCAST Yes 4.35 SW CRDT SYS \$518.00 Last 4 digits of account number 9214 Nonpriority Creditor's Name 2629 DICKERSON PK When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent CARROLLTON 75007 Texas Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **✓** ORIGINAL CREDITOR: 11 AT T **✓** No Other. Specify **UVERSE** Yes TCF Bank 4.36 \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 1405 Xenium Ln N Ste 180 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Minnesota 55441 Minneapolis City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify _ Notice Only Is the claim subject to offset? **✓** No

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 36 of 76

Debtor	1 Kevin J. First Name Middle Name	Thomas Last Name	Case number (if known)	
Part 2:	Your NONPRIORITY Unsecured Cla	aims - Continuation	Page	
	After listing any entries on this page, num	ber them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
	US Bank Nonpriority Creditor's Name 425 Walnut Street Number Street		Last 4 digits of account number When was the debt incurred? n/a As of the date you file, the claim is: Check all that apply.	\$200.00
			Contingent	
	Cincinnati Ohio City State	45202 Zip Code	Unliquidated Disputed	
	Who incurred the debt? Check one. Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only		Student loans	
	Debtor 1 and Debtor 2 only		Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	At least one of the debtors and another		Debts to pension or profit-sharing plans, and other similar debts	
	Check if this claim relates to a comm	unity debt	Other. Specify Collecting For -	
	Is the claim subject to offset?			
	✓ No			
	Yes			

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Page 37 of 76 Document

Thomas Last Name Debtor 1 Kevin First Name Case number (if known) Middle Name

Part 4: Add th	ne Amounts for Each Type of Unsecured Claim						
Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.							
			Total claims				
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$0.00				
	6b. Taxes and certain other debts you owe the government	6b.	. \$0.00				
	6c. Claims for death or personal injury while you were intoxicated	6c.					
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00				
	6e. Total. Add lines 6a through 6d.	6e.	\$0.00				
			Total claims				
Total claims from Part 2	6f. Student loans	6f.	\$53,494.00				
<u>-</u>	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00				
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	. \$0.00				
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$54,709.50				
	6j. Total. Add lines 6f through 6i.	6j.	\$108,203.50				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 38 of 76

Fill in this information to identify your case:								
Debtor 1	Kevin	J.	Thomas					
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States Bankruptcy Court for the:		Northern	District of Illinois (State)					
Case number (If known)			(

Official Form 106G

Check if this is an amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease				State what the contract or lease is for
2.1	Prestige Enterprise Name P.O Box 1074			Residential Lease, Debtor is Lessee, Residential Lease
	Number Homewood City	Street Illinois State	60430 Zip Code	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 39 of 76

				,	
Fill in this infor	mation to identify your c	ase:			
Debtor 1	Kevin	J.	Thomas		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name		
Linitari Otatan F					
United States E	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number			(,		
					Check if this is an
O.(;; ; ;	-				amended filing
Official	Form 106H				
Schedul	e H: Your Cod	lehtors			12/15
1. Do you ha No Yes 2. Within the Idaho, Lou	e last 8 years, have you uisiana, Nevada, New Mex Go to line 3.	ou are filing a joint case, do lived in a community pro- ico, Puerto Rico, Texas, Were spouse, or legal equiva-	operty state or territor Jashington, and Wiscons	y? (<i>Commui</i> sin.)	nity property states and territories include Arizona, California,
	No		•		
	Yes. In which communit	y state or territory did yo	u live?	Fill in t	the name and current address of that person.
	Name of your spouse, f	ormer spouse, or legal equ	ıivalent		
	Number Street				
	City	State	Zip C	Code	
	•		•		ouse is filing with you. List the person shown in line 2 and the creditor on <i>Schedule D</i> (Official Form 106D),

Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Column 1: Your codebtor

Official Form 106H Schedule H: Your Codebtors page 1

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 40 of 76

				3.5			
Fill in this i	nformation to identify	your case:					
Debtor 1	Kevin	J.	Thomas	S			
	First Name	Middle Name	Last Na	ame	Che	eck if this is:	
Debtor 2 (Spouse, if filing	ng) First Name	Middle Name	Last Na	mo	— I п	An amended filing	
						A supplement showing p	oost-petition chapter 13
United State the:	es Bankruptcy Court for	Northern	District of Illin	nois ate)		expenses as of the follow	
Case number	er		10)	atoj			
(If known)						MM / DD / YYYY	
Official	Form 106I						
Schedu	ule I: Your In	come					12/15
information spouse. If n number (if l	about your spouse. I		d your spous	e is not filin	g with you, do	not include informati	ion about your
1. Fill in vo	our employment		Debtor 1			Debtor 2	
informa						_	
	ave more than one job,	Employment status	Employ			Employed	
	separate page with ion about additional		Not Em	ployed		Not Employed	
employe	rs.	Occupation				_	
	oart time, seasonal, or lloyed work.	Employer's name	Mid-West N	Иfg. LLC			
-	ion may include student	Employer's address	6051 Wallace Road Number Street				
	maker, if it applies.					Number Street	
			200				
						_	
			Wexford	Pennsyl	vania 15090		
			City	State	Zip Code	City	State Zip Code
		How long employed there?	-		-		
		tnere?					
Part 2: G	ive Details About N	Monthly Income					
spouse unl	ess you are separated.	the date you file this form e more than one employer, et to this form.		nformation for	-		
		ary, and commissions (befor, calculate what the monthly		2.	\$2,600.00	g spouse	-
3. Estima	ate and list monthly ove	rtime pay.		3.	+ \$0.00		_
4. Calcu	late gross income. Add I	ine 2 + line 3.		4.	\$2,600.00		
				-		-	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 41 of 76

Deb	Kevin J. Thomas		Case numbe					
	First Name Middle Name	Last Name	known) For Debtor 1	For Debtor 2 or non-filing spouse				
Co	ppy line 4 here	→ 4.	\$2,600.00					
5. Li s	st all payroll deductions:							
5	a. Tax, Medicare, and Social Security deductions	5a.	\$551.42					
51	b. Mandatory contributions for retirement plans	5b.	\$0.00					
50	c. Voluntary contributions for retirement plans	5c.	\$0.00					
50	d. Required repayments of retirement fund loans	5d.	\$0.00					
5	e. Insurance	5e.	\$42.68					
51	f. Domestic support obligations	5f.	\$0.00					
5	g. Union dues	5g.	\$0.00					
51	h. Other deductions. Specify:	5h. +	\$0.00 +					
6. Ac +5h.	dd the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e +	5f + 5g 6.	\$594.10					
7. C a	alculate total monthly take-home pay. Subtract line 6 from lin	ne 4. 7.	\$2,005.90					
	st all other income regularly received:							
88	A. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing							
	gross receipts, ordinary and necessary business expenses, and the total monthly net income.	d 8a.	\$0.00					
81	b. Interest and dividends	8b.	\$0.00					
80	c. Family support payments that you, a non-filing spouse, o dependent regularly receive	ra						
	Include alimony, spousal support, child support, maintenance divorce settlement, and property settlement.	8c.	\$0.00					
80	d. Unemployment compensation	8d.	\$0.00					
	e. Social Security	8e.	\$0.00					
81	f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non- cash assistance that you receive, such as food stamps (benefi under the Supplemental Nutrition Assistance Program) or housing subsidies Specify:	ts 8f.	\$0.00					
8.	g. Pension or retirement income	8g.	\$0.00					
	h. Other monthly income. Specify:	8h. +	\$0.00 +					
	dd all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g		\$0.00					
J. AC		7 011.	\$0.00					
	alculate monthly income. Add line 7 + line 9. dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing	10. spouse	\$2,005.90	=	\$2,005.90			
In fri	State all other regular contributions to the expenses that you clude contributions from an unmarried partner, members of you iends or relatives. The one include any amounts already included in lines 2-10 or amounts.	ır household, youı	dependents, your roomr					
	pecify:	ourns that are not	available to pay experious	11.	+ \$0.00			
_								
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data</i> , if it applies								
					Combined monthly income			
13. C	3. Do you expect an increase or decrease within the year after you file this form?							
Ŀ	<u>✓</u> No.							
	Yes. Explain:							

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main

		Docu	ment Page 42 of 7	6	
Fill in this infor	mation to identify	your case:			
Debtor 1	Kevin First Name	J. Middle Name	Thomas Last Name		
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	Check if this is: An amended filing	
	Bankruptcy Court f		District of Illinois (State)	A supplement show expenses as of the	wing post-petition chapter 13 e following date:
Case number (If known)				MM / DD / YYYY	
Official	Form 10	6J			
Schedul	e J: Your	Expenses			12/15
information. If		s possible. If two married people ar leded, attach another sheet to this on.			
Part 1: Des	cribe Your Hou	ısehold			
1. Is this a joi	nt case?				
	o to line 2	in a separate household?			
	No No	in a separate nousenoid.			
	Yes. Debtor 2 r	must file Official Forms 106J-2, Expen	ses for Separate Household of Deb	otor 2.	
2. Do you hav	e dependents?	✓ No			
Do not list Debtor 2.	Debtor 1 and	Yes. Fill out this information for each dependent	Dependent's relationship to Debtor 1 or Debtor 2	Dependent's age	Does dependent live with you?
expenses o	penses include f people other	✓ No			
than yourself an dependents	-	Yes			
Part 2: Esti	mate Your Ong	oing Monthly Expenses			
	of a date after the	our bankruptcy filing date unless y bankruptcy is filed. If this is a sup			
		non-cash government assistance i uded it on <i>Schedule I: Your Incom</i> e			Your expenses
4. The renta	I or home owners	ship expenses for your residence. In	clude first mortgage payments and	l	\$695.00

any rent for the ground or lot. 4.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

If not included in line 4: 4a. Real estate taxes

\$0.00

\$0.00

\$0.00

\$0.00

4.

4a

4b.

4c.

4d.

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 43 of 76

Debtor 1 Kevin J. Thomas Case number (if known)
First Name Middle Name Last Name

S. Additional mortgage payments for your residence, such as home equity loans S. \$0.00	First Name	Mildule Name Last Name		
6. Utilities: 6a. \$130.00 6b. Electricity, heat, natural gas 6a. \$130.00 6b. Water, sewer, garbage collection 6b. \$30.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$80.00 6d. Other, Speedby. 6d. \$30.00 7. Food and housekeeping supplies 8. \$0.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation, include gas, maintenance, bus or train fare. 12. \$347.00 Do not include car payments 13. \$0.00 14. Charitable contributions and religious donations 13. \$0.00 15. Insurance. 15a. \$30.00 15. Insurance. 15a. \$50.00 15b. Health insurance 15a. \$0.00 15c. Vehicle insurance deducted from your pay or included in lines 4 or 20. \$0.00 15c. Vehicle insurance. 15a. \$0.00 15c. Vehicle insurance.				Your expenses
6a. Electricity, heat, natural gas 6a. \$130.00 6b. Water, server, garbage collection 6b. \$0.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. \$60.00 6c. Other, Spacity: 6d \$0.00 7. Food and housekeeping supplies 7. \$255.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include ear payments 12. \$347.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance. 15. \$0.00 15a. Life insurance 15a. \$0.00 15b. Health insurance 15a. \$0.00 15c. Vehicle insurance 15a. \$0.00 15d. Other insurance. Specify: 15a. \$0.00 15d. Other insurance. Specify: 16 \$0.00 15d. Other insurance. Specify: 16 \$0.00 17d. Car payments for Vehicl	5. Additional mortgage payments	for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection 6b. \$0.00 6c. Telephone, call phone, Internet, satellite, and cable services 6c. \$80.00 6d. Other. Specify: 7c. \$250.00 7c. Food and housekeeping supplies 7c. \$250.00 8c. Childcare and children's education costs 8c. \$0.00 9c. Othing, Jaundry, and dry cleaning 9c. \$25.00 10. Personal care products and services 11c. \$20.00 11. Medical and dental expenses 11c. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12c. \$347.00 15. Instrainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance. 15s. \$0.00 15b. Health insurance deducted from your pay or included in lines 4 or 20. 15s. \$0.00 15c. Vehicle insurance 15s. \$0.00 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 Specify: 17c. Car payments for Vehicle 2 17c. \$0.00	6. Utilities:			
6c. Teliaphone, cell phone, Internet, satellite, and cable services 6c. \$60.00 6d. Other. Specify: 6d. \$0.00 7. Food and housekeeping supplies 7. \$250.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 11. Medical and dental expenses 12. \$347.00 Do not include gas, maintenance, bus or train fare. 12. \$347.00 Do not include sayments 13. \$0.00 14. Charitable contributions and religious donations 13. \$0.00 15. Life insurance 15. \$0.00 15a. Life insurance 15a \$0.00 15b. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15c. Vehicle insurance. Specify: 15d \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00 17c. Car payments for Vehicle 1 17a	6a. Electricity, heat, natural gas		6a.	\$130.00
66. Other. Specify: 8d \$0.00 7. Food and housekeeping supplies 7. \$255.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$347.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 15. \$0.00 15. Insurance. 15. \$0.00 15b. Health insurance 15b \$0.00 15b. Health insurance 15b \$0.00 15c. Vehicle insurance 15b \$0.00 15c. Vehicle insurance. Specify: 15c \$99.00 15. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 15c. Vehicle insurance. 15b \$0.00 15c. Vehicle insurance. 15c \$99.00 15c.	6b. Water, sewer, garbage collecti	on	6b.	\$0.00
7. Food and housekeeping supplies 7. \$255.00 8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$347.00 13. Entertailment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a \$0.00 15c. Vehicle insurance 15a \$0.00 15c. Vehicle insurance. Specify: 15a \$0.00	6c. Telephone, cell phone, Interne	et, satellite, and cable services	6c.	\$60.00
8. Childcare and children's education costs 8. \$0.00 9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$347.00 Do not include care payments 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15a \$0.00 15b. Health insurance 15c \$99.00 \$0.00 <td< td=""><td>6d. Other. Specify:</td><td></td><td>6d</td><td>\$0.00</td></td<>	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning 9. \$25.00 10. Personal care products and services 10. \$20.00 11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. 12. \$347.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a. \$0.00 15a. Life insurance deducted from your pay or included in lines 4 or 20. 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance. 15c. \$99.00 15d. Other insurance. Specify: 15d. \$0.00 15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$9.00 15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$9.00 15c. Taxes, Do not include taxes deducted from your pay or included in lines 4 or 20. \$9.00 17a. Car payments for Vehicle 1 17a. \$353.00 17b. Carpayments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00	7. Food and housekeeping supplie	s	7.	\$250.00
10. Personal care products and services 11. Medical and dental expenses 12. Transportation. Include gas, maintenance, bus or train fare. 12. Transportation. Include gas, maintenance, bus or train fare. 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. 16. Insurance 17. Insurance 18. Life insurance 18. Check products and service of the	8. Childcare and children's educa	tion costs	8.	\$0.00
11. Medical and dental expenses 11. \$20.00 12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 12. \$347.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a \$0.00 15b. Health insurance 15b. So.00 \$0.00	9. Clothing, laundry, and dry clean	ing	9.	\$25.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 14. Charitable contributions and religious donations 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Vehicle insurance 15c. Other insurance. Specify: 15c. Other insurance. Specify: 15c. Other insurance. Specify: 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. 15c. Taxes. Do not include taxes deducted from your pay or line 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	10. Personal care products and se	rvices	10.	\$20.00
Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$0.00 14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15. Insurance I	11. Medical and dental expenses		11.	\$20.00
14. Charitable contributions and religious donations 14. \$0.00 15. Insurance. 15a. Ife insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15a. \$0.00 15b. Health insurance 15b. \$0.00 15c. Vehicle insurance 15c. \$99.00 15c. Vehicle insurance. Specify: 15d. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 17. Installment or lease payments. 16 17a. Car payments for Vehicle 1 17a. \$353.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17c. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106). 18. 19. Other payments you make to support others who do not live with you. \$0.00 Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance	_	aintenance, bus or train fare.	12.	\$347.00
15. Insurance.	13. Entertainment, clubs, recreati	on, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.	14. Charitable contributions and r	eligious donations	14.	\$0.00
15b. Health insurance		d from your pay or included in lines 4 or 20.		
15c. Vehicle insurance 15c \$99.00 15d. Other insurance. Specify:	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 Specify:			15c	\$99.00
Specify:	15d. Other insurance. Specify:		15d	\$0.00
17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$353.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	16. Taxes. Do not include taxes ded	ucted from your pay or included in lines 4 or 20.		
17. Installment or lease payments: 17a. \$353.00 17b. Car payments for Vehicle 1 17b. \$0.00 17b. Car payments for Vehicle 2 17b. \$0.00 17c. Other. Specify: 17c. \$0.00 17d. Other. Specify: 17d. \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$0.00 20a. Mortgages on other property 20a. \$0.00 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20c. \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c \$0.00 17d. Other. Specify: 17d \$0.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a \$0.00 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c \$0.00 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	17. Installment or lease payments	:		
17c. Other. Specify:	17a. Car payments for Vehicle 1		17a	\$353.00
17d. Other. Specify:	17b. Car payments for Vehicle 2		17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I). 19.Other payments you make to support others who do not live with you. Specify: 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. So.00 20b. Real estate taxes. 20b. So.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			17d	\$0.00
19. Other payments you make to support others who do not live with you. Specify: 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. So.00 20b. Real estate taxes. 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00			18	\$0.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes. 20b 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		•	10.	
20a. Mortgages on other property20a\$0.0020b. Real estate taxes.20b\$0.0020c. Property, homeowner's, or renter's insurance20c\$0.0020d. Maintenance, repair, and upkeep expenses.20d\$0.00	Specify:		19.	\$0.00
20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00	20.Other real property expenses n	ot included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	20a. Mortgages on other property		20a	\$0.00
20d. Maintenance, repair, and upkeep expenses. 20d \$0.00	20b. Real estate taxes.		20b	\$0.00
	20c. Property, homeowner's, or re	enter's insurance	20c	\$0.00
20e. Homeowner's association or condominium dues 20e \$0.00	20d. Maintenance, repair, and up	keep expenses.	20d	\$0.00
	20e. Homeowner's association or	condominium dues	20e	\$0.00

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 44 of 76

Debtor 1	Kevin	J.	Thomas	Case number (if known)		
	First Name	Middle Name	Last Name			
21. Othe	r. Specify:				21	\$0.00
22. Calc	ulate your monthly expe	enses.				\$1,999.00
22a. /	Add lines 4 through 21.					\$0.00
22b.	Copy line 22 (monthly exp	penses for Debtor 2), if any,	from Official Form 106J-2			\$1,999.00
22c. /	Add line 22a and 22b. The	e result is your monthly exp	enses.		22.	
23.Calcu	late your monthly net ir	ncome.				
23a. (Copy line 12 (your combin	ned monthly income) from	Schedule I.		23a	\$2,005.90
23b.	Copy your monthly expen	ses from line 22 above.			23b	\$1,999.00
		enses from your monthly i	ncome.			\$6.90
	The result is your monthly	net income.			23c	
mort		o finish paying for your car l				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 45 of 76

mation to identify your c	ase:	
Kevin	J.	Thomas
First Name	Middle Name	Last Name
First Name	Middle Name	Last Name
Bankruptcy Court for the:	Northern	District of Illinois
		(State)
	Kevin First Name First Name	First Name Middle Name First Name Middle Name

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t 1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary a that they are true and correct.	and schedules filed with this declaration and						
×	·	*						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 4/5/2017	Date						
	MM/DD/YYYY	MM/DD/YYYY						

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 46 of 76

Fill in	n this info	rmation to identify your c	ase:					
Debt	or 1	Kevin First Name	J. Middle N	Thoma		_		
Debt (Spou	or 2 se, if filing)	First Name	Middle N	Name Last N	ame	_		
Unite	ed States	Bankruptcy Court for the:	Northern	District of III		_		
Case (If kno	e number wn)			(5	itate)	_		
Off	ficial	Form 107						Check if this is a amended filing
		ent of Financia	l Δffaire f	or Individuals	s Filina fa	or Bankru	intev	12/1:
Be as	s comple mation.	ete and accurate as po If more space is neede nown). Answer every q	ssible. If two made, attach a sepa	arried people are filin	g together, bo	th are equally i	responsible for s	supplying correct
Part	1: Giv	e Details About Your	Marital Status	and Where You Live	ed Before			
1.	What is	s your current marital sta	atus?					
	ш	arried ot married						
2.	During	the last 3 years, have yo	u lived anywhere	e other than where you	live now?			
	✓ No	s. List all of the places yo	ou lived in the last	: 3 years. Do not includ	e where you live	e now.		
	De	btor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same	as Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number S	treet		From To
	Cit	y State	Zip Code		City	State	Zip Code	
					Same	as Debtor 1		Same as Debtor 1
	Nu	mber Street		From	Number S	treet		From
	Cit	y State	Zip Code		City	State	Zip Code	
	and territo	ne last 8 years, did you e ories include Arizona, Califo Make sure you fill out So	ornia, Idaho, Louis	iana, Nevada, New Mexi	co, Puerto Rico,			

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 47 of 76

Thomas Debtor 1 Kevin Case number (if known) Middle Name First Name Last Name Part 2: Explain the Sources of Your Income Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. Yes. Fill in the details. **Debtor 1** Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions and exclusions) exclusions) ✓ Wages, Wages, \$4380.00 From January 1 of current year until commissions, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips Operating a Operating a business business Wages, Wages, \$26578.00 For last calendar year: commissions, commissions, 2016 (January 1 to December 31, bonuses, tips bonuses, tips YYYY Operating a Operating a business business Wages, Wages, **✓** \$30951.00 For the calendar year before that: commissions. commissions. (January 1 to December 31, 2015) bonuses, tips bonuses, tips Operating a Operating a business business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income Sources of income Gross income from Gross income from Describe below. each source Describe below. each source (before deductions and (before deductions and exclusions) exclusions) From January 1 of current year until the date you filed for bankruptcy: For last calendar year: (January 1 to December 31, 2016 For the calendar year before that: (January 1 to December 31, 2015

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 48 of 76

Thomas Debtor 1 Kevin __ Case number (if known) Middle Name First Name Last Name List Certain Payments You Made Before You Filed for Bankruptcy Part 3: 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Dates of payment Total amount paid Amount you still owe Was this payment for... Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors

Other

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 49 of 76

tor	1 Kevin		J.	Tho	mas	Case number	(if known)
	First Name		Middle Name	Last	Name		
Ins cor age	iders include your re porations of which y	elatives; an you are an r a busine	y general partners officer, director, p ss you operate as	; relatives of any overson in control,	general partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? ou are a general partner; g securities; and any managing domestic support obligations,
✓	No						
	Yes. List all paym	ents to ar	n insider.				
				Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name						
	Number Street						
	City S	State	Zip Code				
	Insider's Name						
	Number Street						
	City S	State	Zip Code				
ins	thin 1 year before yider? lude payments on d No Yes. List all paym	ebts guara	anteed or cosigned	d by an insider. der. Dates of	Total amount	Amount you	n account of a debt that benefited an Reason for this payment
				payment	paid	still owe	Include creditor's name
	Insider's Name						
	Number Street						
	City S	State	Zip Code				
	Insider's Name						
	Number Street						
		State	Zip Code				

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 50 of 76

Thomas Debtor 1 Kevin Case number (if known) Middle Name First Name Last Name Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Collections Circuit Court of Cook County, Illinois Pending Prestige Financial v. Kevin Thomas, et Court Name On appeal 5600 Old Orchard Road **NumberStreet** Concluded Case number Illinois 60077 Skokie 11-M1-100107 City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Value of the Describe the property Date property 2005 Buick LaSabre \$0 American Credit Acceptance Creditor's Name Explain what happened Attn: Marie Brisbon Number Street Property was repossessed. 961 East Main Street Property was foreclosed. South Carolina 29302 Spartanburg Property was garnished. State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 51 of 76

Debt	tor 1 Kevin First Name	J. Middle Name	Thomas Last Name	Case number (if known)	
11.	accounts or refuse to make			oank or financial institution, set off any a	mounts from your
	✓ No				
	Yes. Fill in the details.				
			Describe the action th	e creditor took Date action was taken	
	Creditor's Name		-		
			_		
	Number Street		_ Last 4 digits of account	number YYYY-	
			_ Last + digits of account	number. AAAA	
	City State	Zip Code	-		
12.	Within 1 year before you file appointed receiver, a custoo			possession of an assignee for the benefit	of creditors, a court-
	✓ No				
	Yes				
Part	5: List Certain Gifts and	Contributions			
13.	Within 2 years before you fi	led for bankruptcy, di	d you give any gifts with a t	otal value of more than \$600 per person	?
	✓ No				
	Yes. Fill in the details fo	r each gift.			
	Gifts with a total value per person	of more than \$600	Describe the gifts	Dates you gave the gifts	Value
	Person to Whom You Ga	ve the Gift	<u> </u>		
	N. arker Obert		_		
	Number Street		_		
	City State	Zip Code			
	Person's relationship to y	ou			
	Person to Whom You Ga	ve the Gift	-		
			_		
	Number Street		-		
	City State	Zip Code	-		
	Person's relationship to ye	ou			

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 52 of 76

	Kevin	J.	Thomas Ca	se number <i>(if known)</i>	
	First Name	Middle Name	Last Name		
. Wit	hin 2 years before you filed	l for bankruptcy, did	you give any gifts or contributions wit	h a total value of more than	\$600 to any charity?
	No				
✓	No				
	Yes. Fill in the details for e	ach gift or contributi	on.		
	Gifts or contributions to o	harities	Describe what you contributed	Date you	Value
	that total more than \$600		Describe what you contributed	contribute	
	that total more than 4000			Contribute	, u
	Charity's Name		-		
	Number Street		-		
	Namber Street				
	City State	Zip Code	-		
	Oity State	Zip Oode			
c.	List Certain Losses				
· v.	Elet Certain Ecocce				
	Yes. Fill in the details. Describe the property you how the loss occurred	ı lost and	Describe any insurance coverage Include the amount that insurance h	as paid. List loss	our Value of property lost
			pending insurance claims on line 33	of Schedule	
			A/B: Property.		
					<u> </u>
rt 7:	List Certain Payments	or Transfers			
	No Yes. Fill in the details.	y poution proparoto, o	r credit counseling agencies for services r	oquilou iii your builliuptoy.	
			Description and value of any prop transferred	erty Date payn or transfe	
					r payment
			transferred	or transfe was made	r payment
	Semrad Law Firm			or transfe	r payment
	Semrad Law Firm Person Who Was Paid		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	60643	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois	60643 Zin Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street	60643 Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois		transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payr	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payr	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid Number Street	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid Number Street	Zip Code	transferred	or transfe was made	r payment
	Semrad Law Firm Person Who Was Paid 11101 S. Western Avenue Number Street Chicago Illinois City State Email or website address None Person Who Made the Payn Person Who Was Paid Number Street City State	Zip Code	transferred	or transfe was made	r payment

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 53 of 76

Debtor 1	1 Kevin J.		Thomas	Case numbe	er (if known)	
	First Name Mid	ddle Name	Last Name			
he	ithin 1 year before you filed for ban elp you deal with your creditors or to not include any payment or transfer	o make paym	ents to your creditors?	our behalf pay or	transfer any property to a	anyone who promised to
✓	No Yes. Fill in the details.					
	-		Description and value of transferred	any property	Date payment or transfer was made	Amount of payment
	Person Who Was Paid					
	Number Street					
	City State	Zip Code				
		•				
the Inc	ithin 2 years before you filed for ba e ordinary course of your business clude both outright transfers and trans d transfers that you have already listed	or financial af sfers made as s	fairs? ecurity (such as the granting of			
✓	No Yes. Fill in the details.					
			Description and value of property transferred	payı	cribe any property or ments received or debts p xchange	Date transfer was made
	Person Who Received Transfer					
	Number Street					
	City State Person's relationship to you	Zip Code				
	Person Who Received Transfer					
	Number Street					
	City State Person's relationship to you	Zip Code				
be	ithin 10 years before you filed for beneficiary? hese are often called asset-protection		l you transfer any property to	a self-settled tru	st or similar device of whi	ch you are a
✓	-					
	_		Description and value o	f the property trai	nsferred	Date transfer was made
	Name of trust					

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 54 of 76

Thomas Debtor 1 Kevin _ Case number (if known) First Name Last Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance account was before number instrument closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City State Zip Code Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Yes Number Street Number Street City State Zip Code City Zip Code State 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? No Name of Storage Facility Name Number Street Street Number City State Zip Code

City

State

Zip Code

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 55 of 76

Thomas Debtor 1 Kevin _ Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code Zip Code City State Part 10: **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street Number Street City State Zip Code City State Zip Code 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street NumberStreet City State Zip Code City State Zip Code

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 56 of 76

Debto				J.	Т	homas	Cas	e number <i>(ii</i>	fknown)		
		First Name		Middle Name	L	ast Name					
26. H	Hav	e you been a part	y in any judio	cial or administ	rative proc	eeding under	r any environmer	ntal law? In	clude settler	nents and orde	ers.
[<u>·</u>	✓	No Yes. Fill in the de	tails.								
					Court or a	gency		Nature	of the case		Status of the case
		Case title									Pending
					Court Nam	е					On appeal
		Case number			NumberStr	eet					Concluded
					City	State	Zip Code				Considuca
Part 1	11:	Give Details Al	bout Your E	Business or C	onnection	s to Any Bu	ısiness				
27. V	With	nin 4 years before	you filed for	bankruptcy, di	d you own a	a business or	have any of the	following c	onnections t	o any business	s?
		A sole propri	ietor or self-e	employed in a tr	ade, profes	ssion, or othe	r activity, either f	iull-time or p	oart-time		
		A member o	f a limited liab	oility company ((LLC) or limi	ted liability pa	artnership (LLP)				
		A partner in									
		_		anaging executi	-						
		An owner of	at least 5% o	of the voting or	equity secu	rities of a cor	poration				
	✓	No. None of the a									
		Yes. Check all the	at apply abo	ve and fill in the	e details bel	ow for each b	ousiness.				
					Desc	cribe the nat	ure of the busine	ess			number Do not number or ITIN.
		Business Name							EIN:		
		Number Street			_				Dates busi	ness existed	
		City	Chata	Zia Cada	Nam	e of account	ant or bookkeep	per		_	
		City	State	Zip Code					From	То	
					Desc	cribe the nat	ure of the busine	ess			number Do not number or ITIN.
		Business Name							EIN:		
		Number Street							Dates busi	ness existed	
		0''	0	7: 0 !	Nam	e of account	ant or bookkeep	er			
		City	State	Zip Code					From	To	
					Desc	cribe the nat	ure of the busine	ess			number Do not
										cial Security n	number or ITIN.
		Business Name			_				EIN:		
		Number Street			No	e of account	ant or bookkoo	ner .	Dates busi	ness existed	
		City	State	Zip Code		ie oi account	ant or bookkeep	Je1	From	То	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 57 of 76

Deb	tor 1 Kevin	J.	Thomas	Case number (if known)
	First Name	Middle Name	Last Name	
28.	creditors, or other parties.		ou give a financial stateme	nt to anyone about your business? Include all financial institutions,
	✓ No Yes. Fill in the details b	elow.		
	_		Date issued	
	Name		MM/DD/YYYY	
	Number Street		_	
	Number Suest			
	City Sta	ate Zip Code	_	
Part	t 12: Sign Below			
1	true and correct. I understa	nd that making a false sta	atement, concealing proper	ents, and I declare under penalty of perjury that the answers are ty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	/s/ Kevin	Thomas		
	Signature of	Debtor 1		Signature of Debtor 2
	Date 4/5/2	017		Date
ı	Did you attach additional pa	ges to Your Statement o	f Financial Affairs for Individ	luals Filing for Bankruptcy (Official Form 107)?
	✓ No			
	Yes			
ı	Did you pay or agree to pay	someone who is not an a	ttorney to help you fill out b	ankruptcy forms?
	✓ No			
	Yes. Name of person			Attach the <i>Bankruptcy Petition Preparer's Notice,</i> Declaration, and Signature (Official Form 119).

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 58 of 76

Fill in this information to identify your case:					
Debtor 1	Kevin	J.	Thomas		
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		Northern	District of Illinois		
Case number (If known)			(State)		

Check if this is an amended filing

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Did you claim the property Identify the creditor and the property that is collateral What do you intend to do with the property that secures a debt? as exempt on Schedule C? Surrender the property. Creditor's name: Honor Finance Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 042 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]: No. Surrender the property. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agréement. securing debt: Retain the property and [explain]:

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 59 of 76

Debtor	Kevin	J.	Thomas	Case number (if	
1	First Name	Middle Name	Last Name	known)	
Part 2:	List Your Unexpire	ed Personal Property Lea	ses		
informa	ition below. Do not lis		d leases are leases that	y Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).	
Des	scribe your unexpired	personal property leases		Will the lease be assumed?	
Les	ssor's name:			No Yes	
	scription of leased perty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:				
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Les	ssor's name:			No Yes	
	scription of leased perty:			_	
Les	ssor's name:			□ No □ Yes	
	scription of leased perty:			_	
Part 3:	Sign Below				
Unde			I my intention about any	property of my estate that secures a debt and any personal	
×	/s/ Kevin Thomas		×		
_	ignature of Debtor 1			nature of Debtor 2	
D	ate 4/5/2017 MM/DD/YYYY		Dat	te MM/DD/YYYY	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 60 of 76

B2030 (Form 2030) (12/15)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Kevin J. Thomas		Case No.	
_	Debtor		-	(If known)
			Chapter	Chapter 7
	DISCLOSURE OF C	OMPENSAT	ION OF ATTORNEY	FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Fe compensation paid to me within one your rendered or to be rendered on behalf or	ear before the filing of	the petition in bankruptcy, or agree	ed to be paid to me, for services
	For legal services, I have agreed to acc	ept		\$1,365.00
	Prior to the filing of this statement I ha	ve received		\$0.00
	Balance Due			\$1,365.00
2.	The source of the compensation paid t	o me was:		
	✓ Debtor	Other (spe	cify)	
3.	The source of the compensation paid t	o me is:		
	✓ Debtor	Other (spe	ecify)	
4.	I have not agreed to share the abormembers and associates of my lav	ve-disclosed compens v firm.	sation with any other person unless	s they are
		firm. A copy of the agr	on with a other person or persons weement, together with a list of the r	
5.	In return for the above-disclosed fee, I a. Analysis of the debtor's financi bankruptcy;		legal service for all aspects of the bering advice to the debtor in determ	
	b. Preparation and filing of any pe	etition, schedules, stat	ements of affairs and plan which m	nay be required;
	c. Representation of the debtor at	the meeting of credit	ors and confirmation hearing, and a	any adjourned hearings thereof;
6.	By agreement with the debtor(s), the ab	pove-disclosed fee do	es not include the following service	95:
		CERT	IFICATION	
	certify that the foregoing is a complete tor(s) in this bankruptcy proceedings.	statement of any agre	ement or arrangement for payment	to me for representation of the
	4/5/2017		/s/ Chris Pryor	
	Date		Signature of Attorney	
			Semrad Law Firm	
	_		Name of law firm	

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1 717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 65 of 76

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Thomas, Kevin J. Debtor(s)	Case No	Case No		
		Chapter.	Chapter7		
	VERIFIC	ATION OF CREDITOR MAT	ΓRIX		
Th knowledge	ne above named Debtors hereby verify e.	that the attached list of creditors is to	rue and correct to the best of their		
Date:	4/5/2017	/s/ Thomas, Kev Thomas, Kevin Signature of De	J.		

FED LOAN SERV 400 Maryland Ave SW Washington, DC, 20202

Honor Finance 1731 CENTRAL ST EVANSTON, IL, 60201

ENHANCED RECOVERY CO L 8014 BAYBERRY RD JACKSONVILLE, FL, 32256

JEFFERSON CAPITAL SYST 16 MCLELAND RD SAINT CLOUD, MN, 56303

SW CRDT SYS 2629 DICKERSON PK CARROLLTON, TX, 75007

FIRST PREMIER BANK c/o Jefferson Capital Systems LLC PO Box 7999 c/o Linda Dold Saint Cloud, MN, 56302

FST PREMIER 900 W DELAWARE SIOUX FALLS, SD, 57104

RCVL PER MNG 20816 44TH AVE WES LYNNWOOD, WA, 98036

FALLS COLLECTION SVC PO BOX 668 GERMANTOWN, WI, 53022

CONVERGENT OUTSOURCING 800 SW 39TH ST RENTON, WA, 98057

Stellar Rec 1327 HIGHWAY 2 WES SUITE 100 KALISPELL, MT, 59901 Prestige Financial Services PO Box 26707 Salt Lake City, UT, 84126

Cook County Department of Revenue 118 N Clark St, Room 1160 Chicago, IL, 60602

IRS 1 PO Box 7346 Philadelphia, PA, 19101

State of Illinois - Dept of Revenue Po Box 64338 Chicago, IL, 60664

Nicor Gas PO Box 0632 Aurora, IL, 60507

Commonwealth Edison 3 Lincoln Ctr Attn: Bankruptcy Department Oakbrook Ter, IL, 60181

First National Collection Bureau, Inc 610 Waltham Way Sparks, NV, 89434

AT&T Mobility One AT&T Way, Room 3A 104 Bedminster, NJ, 07921

Focus Receivables Management, LLC 1130 North Chase Pkwy Suite #150 Marietta, GA, 30067

PENN CREDIT CORPORATION 916 S 14TH ST HARRISBURG, PA, 17104

ICS Collection Service PO Box 1010 Tinley Park, IL, 60477

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 68 of 76

Midwest Diagnostic Pathology, SC PO Box 578 Park Ridge, IL, 60068

Financial Control Solutions Po Box 668 Germantown, WI, 53022

PLS 1 S Wacker Dr Fl 36 Chicago, IL, 60606

Speedy Cash Po Box 782648 Wichita, KS, 67278

Check N Go 7101 W North Ave Oak Park, IL, 60302

American Credit Acceptance Attn: Marie Brisbon 961 East Main Street Spartanburg, SC, 29302

Franciscan Health & Fitness 221 US Hwy 41, Suite A Schererville, IN, 46375

US Bank Po Box 5229 C/O Bankruptcy Department Cincinnati, OH, 45201

TCF Bank 601 W 14th Street Chicago Heights, IL, 60411

Chase Bank 340 S. Cleveland Bldg 370 OH1-1073 Westerville, OH, 43081

Public Storage PO Box 25050 Glendale, CA, 91221

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1,365.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding.\$350.00/hr.Adding additional bills\$30.00Motion to Reopen and Avoid Lien\$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 2. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Initial: K5T

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 70 of 76

the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 04/05/17

nitial: KJT

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 71 of 76

Debtor 1 Kevin First Name			ase number (if known)		
		ast Name			
	estions for Reporting Purposes 16a. Are your debts primarily o	consumer debts? Cons	umer dehte are defined	in 11 I I S C & 101(8) ac	
16. What kind of debts do you have?	"incurred by an individual p No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily b money for a business or inv No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you	orimarily for a personal, for a personal pers	family, or household pu ss debts are debts that y operation of the busine	rpose." you incurred to obtain ess or investment.	
^{17.} Are you filing under Chapter 7?	No. I am not filing under Chapt	ter 7. Go to line 18.	e entrette en entrette en kommente en en entrette en entrette en entrette en ent	eriner de aminimistrativa de la	
Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under Chapter 7 expenses are paid that fur No. Yes.	'. Do you estimate that afternds will be available to distr	r any exempt property is e ribute to unsecured credit	excluded and administrative ors?	
18. How many creditors do you estimate that you owe?	✓ 1-49✓ 50-99✓ 100-199✓ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	 5	5,001-50,000 0,001-100,000 fore than 100,000	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$2 \$50,000,001-\$2 \$100,000,001-\$2	50 million \$	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion	
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 \$10,000,001-\$5 \$50,000,001-\$1 \$100,000,001-\$1	50 million \$	500,000,001-\$1 billion 1,000,000,001-\$10 billion 10,000,000,001-\$50 billion lore than \$50 billion	
Part 7: Sign Below					
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.				
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 134,1, 1519, and 35,71.				
	/s/ Kevin Thomas Signature of Debtor 1	ich Hismoo 3	Signature of Debtor 2		
	Executed on 4/5/2017 MM / DD / V	YYYY	Executed on	IM / DD / YYYY	

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 72 of 76

Fill in this info	rmation to identify your cas	9:			
Debtor 1	Kevin		Thomas		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	C. A. M.				
(Operase, it imag)	First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the: N	lorthern	District of Illinois		
Case number			(State)		
(If known)					Production of the second
Official	Form 106Dec			,	Check if this is an amended filing
Declarat	ion About an In	dividual Deb	tor's Schedules		12/15
If two married	people are filing together.	both are equally respo	nsible for supplying correct info	ormation	
Part 1: Sign	N-100-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-	e who is NOT an attorn	ney to help you fill out bankrupt	cy forms?	7
√ No					
Yes. 1	Name of person		Attach Bankruptcy Petitio Signature (Official Form 1	n Preparer's Notice, Declaration, and 19).	The state of the s
					to an expression of a party of the state of
Under per that they	naity of perjury, I declare the are true and correct.	nat I have read the sun	nmary and schedules filed with t	this declaration and	
🗶 /s/ Kevin	100000	Thomas	*		name vi
Signature o	of Debtor 1		Signature of De	ebtor 2	

MM/DD/YYYY

Date 4/5/2017

MM/DD/YYYY

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 73 of 76

Debtor ⁻			Thomas	Case number (if known)
A C 1988 T 1988 A 1	First Name	Middle Name	Last Name	
28. Wi	ithin 2 years before yo editors, or other partio No Yes. Fill in the details	es.	you give a financial staten	ent to anyone about your business? Include all financial institutions
<u> </u>	100.7 III II II II O O CAIR	J DOIOW.		
			Date issued	
	Name		MM/DD/YYYY	_
		,		
	Number Street		****	•
	City	State Zip Code		
Part 12:	Sign Below			
abai	*	sult in fines up to \$250,000	, or imprisonment for up to	20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		in Thomas (1) 74.	Alleman	×
	Signature	rin Thomas AWW of Debtor 1	Allumes	Signature of Debtor 2
	Signature Date 4/5.	of Debtor 1	<u>Allun</u> rop	
Did y	Date 4/5.	of Debtor 1 /2017		Signature of Debtor 2 Date
	Date 4/5.	of Debtor 1 /2017		Signature of Debtor 2
<u> </u>	Date 4/5. rou attach additional p	of Debtor 1 /2017		Signature of Debtor 2 Date
<u> </u>	Date 4/5.	of Debtor 1 /2017		Signature of Debtor 2 Date
	Date 4/5, you attach additional p No Yes	of Debtor 1 /2017	f Financial Affairs for Indiv	Signature of Debtor 2 Date Iduals Filing for Bankruptcy (Official Form 107)?
Did y	Date 4/5, you attach additional p No Yes	of Debtor 1 /2017 pages to Your Statement o	f Financial Affairs for Indiv	Signature of Debtor 2 Date Iduals Filing for Bankruptcy (Official Form 107)?

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 74 of 76

Debtor Kevin		Thomas	Case number (if
First Name	Middle Name	Last Name	known)
art 2: List Your Unexpired	i Personal Property Leas	es	
or any unexpired personal pro formation below. Do not list i ssume an unexpired personal	real estate leases. Unexpired	l leases are leases that :	Contracts and Unexpired Leases (Official Form 106G), fill in the are still in effect; the lease period has not yet ended. You may U.S.C. § 365(p)(2).
Describe your unexpired po	ersonal property leases		Will the lease be assumed?
Lessor's name:			□ No
Description of leased property:			Yes
Lessor's name:		THE PART AND THE STATE OF THE S	☐ No ☐ Yes
Description of leased property:	The common differential accommendation of the control of the contr	MMMA METER WESTERN 1971 A THE ACTION THE PROMISED AN MEMBER PROMISED AND ACTION AS A THE ACTIO	Tool State of the
Lessor's name:	er intermediate and an experience of the second	The second secon	☐ No ☐ Yes
Description of leased property:			
Lessor's name:			□ No □ Yes
Description of leased property:			den en e
Lessor's name:			☐ No ☐ Yes
Description of leased property:			hand
Lessor's name:		en de Santa de La Carta de La Carta de La Carta de La La Carta de La Carta de	No
Description of leased property:		· · · · · · · · · · · · · · · · · · ·	L] Yes
Lessor's name:		بر ر د <u>د د د</u>	□ No □ Yes
Description of leased property:		v v	165
3: Sign Below	er er er er er er er		
Under penalty of perjury, I dec property that is subject to an	lare that I have indicated munexpired lease.	y intention about any pr	operty of my estate that secures a debt and any personal
/s/ Kevin Thomas Signature of Debtor 1	mi Alromas	X Signa	ture of Debtor 2
Date 4/5/2017 MM/DD/YYYY		Date	MM/DD/YYYY

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 75 of 76

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Thomas, Kevin	Case No	
	Debtor(s)	Case NO	
		Chapter.	Chapter7
	VERIFICATI	ON OF CREDITOR MATR	IX
Th knowledge	ne above named Debtors hereby verify that e.	the attached list of creditors is true	and correct to the best of their
Oate:	4/5/2017	/s/ Thomas, Kevin Thomas, Kevin Signature of Debtor	Kevn J. Thomas

Case 17-10765 Doc 1 Filed 04/05/17 Entered 04/05/17 12:13:31 Desc Main Document Page 76 of 76

Debtor 1 Kevin	Thomas	Case number (if known)		
First Name Middle Nan	ne Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
Unemployment compensation Do not enter the amount if you contend that the under the Social Security Act. Instead, list it here:		\$0.00		
For your spouse	\$0.00 \$0.00			
 Pension or retirement income. Do not include benefit under the Social Security Act. 	any amount received that was a	\$0.00		•
10.Income from all other sources not listed abo amount. Do not include any benefits received und payments received as a victim of a war crime, a co- international or domestic terrorism. If necessary, lipage and put the total below.	der the Social Security Act or time against humanity, or			·

Total amounts from separate pages, if any.		+\$0.00	+]
11. Calculate your total current monthly income each	e. Add lines 2 through 10 for	\$2,757.33 +		\$2,757.33
column. Then add the total for Column A to the	e total for Column B.			
				Total current monthly income
Part 2: Determine Whether the Means Tes				
 Calculate your current monthly income for the 12a. Copy your total current monthly income from 	•	Copy line	11 here →	\$2,757.33
Multiply by 12 (the number of months in a y	vear).			X 12
12b. The result is your annual income for this part	t of the form.		12b.	\$33,087.96
13 Calculate the median family income that appl	ies to you. Follow these steps:			
Fill in the state in which you live.	Ellinois The state of the stat			
Fill in the number of people in your household.	The second secon			
Fill in the median family income for your state and household.	size of		13.	\$50,765.00
To find a list of applicable median income amount instructions for this form. This list may also be available.	s, go online using the link specified i allable at the bankruptcy clerk's office.	in the separate		
14. How do the lines compare?				
14a. Line 12b is less than or equal to line 13. Go to Part 3.	On the top of page 1, check box 1,	There is no presumption of abu	se.	
14b. Line 12b is more than line 13. On the to Go to Part 3 and fill out Form 122A-2.	p of page 1, check box 2, The presu	imption of abuse is determined l	by Form 122A-2.	
Part 3: Sign Below				
By signing here, I declare under penalty of perjury	that the information on this stateme	ent and in any attachments is tru	e and correct.	
$\sqrt{2}$ $\sqrt{2}$				
/s/ Kevin Thomas Signature of Debtor 1	mad ×	nature of Dobtor 2		_
,	_	nature of Debtor 2		
Date 4/5/2017 MM/DD/YYYY	Dat	te 4/5/2017 MM/DD/YYYY		
If you checked line 14a, do NOT fill out or file F If you checked line 14b, fill out Form 122A-2 a			~	